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CONFIRMATION NO. ATTORNEY DOCKET NO. FIRST NAMED INVENTOR FILING DATE APPLICATION NO. 8312 8717MC 09/12/2003 Michael Philip Clark 10/661,730 **EXAMINER** 04/06/2004 27752 7590 MCKENZIE, THOMAS C THE PROCTER & GAMBLE COMPANY INTELLECTUAL PROPERTY DIVISION PAPER NUMBER ART UNIT WINTON HILL TECHNICAL CENTER - BOX 161 1624 6110 CENTER HILL AVENUE CINCINNATI, OH 45224

DATE MAILED: 04/06/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)
Interview Summary	10/661,730	CLARK ET AL.
	Examiner	Art Unit
	Thomas McKenzie Ph.D.	1624
All participants (applicant, applicant's representative, PTO personnel):		
(1) Thomas McKenzie Ph.D.	(3)	
(2) <u>Richard Eschler</u> .	(4)	
Date of Interview: 19 March 2004.		
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2)□ applicant's representative]		
Exhibit shown or demonstration conducted: d)☐ Yes e)☑ No. If Yes, brief description:		
Claim(s) discussed: <u>none</u> .		
Identification of prior art discussed: <u>none</u> .		
Agreement with respect to the claims f) was reached. g) was not reached. h) № N/A.		
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The petition to deleted inventors, which had been matched to the parent file, 10/246,214, in fact was intended for this case. A copy of the petition will be entered into the record. A copy of the petition is attached.  (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.		

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required